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APPLICANTS

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** CONTINUING DATA *****
 - None - B C

** FOREIGN APPLICATIONS *****
 - None - B C

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/28/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <u>[Signature]</u> Initials: <u>[Initials]</u>	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 2
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TITLE
 Fluid treatment of a polymeric coating on an implantable medical device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)

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☐ Other

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